☐ Initial Registration

Management



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Out of State Committee					г			
Standing Political Committee Titles 16 & 19, Arizona Revised Statutes Definitions, statutory references and important information on page 2.						13540FFICE OF		
NAME OF POLITICAL COMMITTEE (For ballot measure committee, name shall include official petition senal number) AFSCME PEOPLE					r) .	DATE 03/23/20	CHYCLE	
TYPE OF COMMITTEE			BALLOT MEASURE			□ SUPPORT □ OPPOSE		
POLITICAL ACTION COMMITTEE			BACCOT WEAGONE			0011 011		
COMMITTEE ADDRESS			CITY			STATE ZIP		
1625 L STREET, NW			WASHINGTON			DC	20036	
COMMITTEE MAILING ADDRESS (if different from above)			CITY			STATE	ZIP	
1625 L ST NW			WASHINGTON			DC	20036	
COMMITTEE TELEPHONE #	COMMITTEE FAX #		COMMITTEE E		EE EMAI	L ADDRE	SS	
202) 429-1088	(202) 429-1197		CHUI@AFSCMI					
NAME OF SPONSORING ORGANIZATION (if applicable)			TYPE OF ORGANIZATION					
AFSCME			LABOR UNION					
ADDRESS OF SPONSORING ORGANIZATION			RELATIONSHIP TO POLITICAL COMMITT			IITTEE		
1625 L ST NW WASHINGTON DC 20036			SPONSOR					
SINGLE POLITICAL COMMITTEE MAY NOT BE TREASURER OF HIS OR HER OWN CAMPAIGN NAME OF COMMITTEE CHAIRMAN		902(A).				RMAN'S F.		
LEE A. SAUNDERS		CHAIRMAN'S TELEPHONE # (202) 429-1000		(202) 429-1102				
CHAIRMAN'S ADDRESS						ZIP		
1625 L ST NW		WASHINGTON		DC				
CHAIRMAN'S OCCUPATION	CHAIRMAN'S EMPLOYER	CHAIRMAN		N'S EMAIL ADDRESS				
INTERNATIONAL UNION PRESIDENT	AFSCME							
NAME OF COMMITTEE TREASURER	<u> </u>	TREASURER'S TELEPHONE # TRI		TREA	REASURER'S FAX #			
ELISSA MCBRIDE		(202) 429-1000			(202) 429-1102			
TREASURER'S ADDRESS		CITY			STATI	Ξ	ZIP	
1625 L ST NW		WASHING	TON		DC 20036		20036	
TREASURER'S OCCUPATION	R TREASURER'S			ER'S EN	R'S EMAIL ADDRESS			
SECRETARY-TREASURER	AFSCME							
LIST THE NAMES OF ALL FINANCIAL INSTITU (Do not list account numbers.)	TIONS WITH WHICH THE C	OMMITTEE	MAINTA	NS ACCOUN	NTS OR	SAFETY	DEPOSIT BOXES.	
1. AMALGAMATED BANK	ATED BANK			3.				
FOR A CANDIDATE'S CAMPAIGN COMMITTEE (For Explorato	OR AN EXPLORATORY Cory Committees p arty affilia					NFORMA	TION:	
NAME OF CANDIDATE OR DESIGNATING INDIV	VIDUAL ("DI")				ELEC	TION CYC	CLE	
CANDIDATE OR D/I'S TELEPHONE #	TE OR D/I'S TELEPHONE # CANDIDATE OR D/I'S FA		K# COUNTY C		OF RES	DF RESIDENCE		
CANDIDATE OR D/I'S ADDRESS	<u> </u>	CITY		*	STAT	E	ZIP	
CANDIDATE OR D/I'S EMAIL ADDRESS	PARTY AFFILIATION		OFFICE SOUG		OUGHT	L GHT		

Committee ID: 1354

Date:

03/23/2017

Form ID:

0000412619



YOUR APPLICATION IS NOT COMPLETE WITHOUT THE REQUIRED SIGNATURES BELOW:

BOX 1	All committees require the signature of both the chairman and treasurer. Standing Committees, see BOX 3 below.
campaid	MAN'S AND TREASURER'S STATEMENT: We, the undersigned chairman and treasurer, have read all of the applicable laws relate ing to generate and reporting and have examined the information contained in this statement of organization and, to the besent of our dge and belief, it is true, correct and complete.
Date:	2/27/17 Chairman's signature:
Date:	Treasurer's signature:
BOX 2	Complete and sign this additional box only if the committee is a candidate's campaign committee or exploratory committee.
	NATING INDIVIDUAL OR CANDIDATE'S STATEMENT: I authorize the above -named political committee as my political committee to
receive	contributions and make expenditures on my behalf.
Date:	D/l's or Candidate's signature:
вох з	Complete and notarize this box only if the committee has been in existence for more than one year and is filing for Standing Committee status.
	DING POLITICAL COMMITTEE'S STATEMENT (if applicable) A.R.S. §16 -902.01): I/we hereby declare the status of this political ittee as a standing political committee.
Date:	327/7 Chairman's signature:
Date:	3/27/17 Treasurer's signature:
State	Arizona District of Columbia State of Arizona District of Columbia) ss.
Count	County of)
Count	State of Arizona District of Columbia State of Arizona D



LINDA E. BATES
NOTARY PUBLIC DISTRICT OF COLUMBIA
My Commission Expires September 30, 2019

State of Arizona

Department of State

Campaign Finance Statement of Organization



I, Michele Reagan, Arizona Secretary of State, do hereby certify that on March 23, 2017, "AFSCME PEOPLE" filed an amended Statement of Organization with the Arizona Secretary of State's Office. This committee has been assigned Identification Number 1354. The Chairperson and Treasurer have read the Secretary of State's campaign finance filing guide, agreed to comply with Arizona campaign finance law, and agreed to accept all notifications and service of process via email.

Committee AFSCME PEOPLE

1625 L ST NW

WASHINGTON, DC 20036

Type: POLITICAL ACTION COMMITTEE

Organization Date: 04/15/1986 Bank: AMALGAMATED BANK

Contact: (202) 429-1088 chui@afscme.org

Sponsor

AFSCME

1625 L ST NW

Washington, DC 20036

Contact:

Chairperson LEE A. SAUNDERS

1625 L ST NW

WASHINGTON, DC 20036

Employer/Occupation: AFSCME/international union president

Contact: (202) 429-1000

Treasurer

ELISSA MCBRIDE

1625 L ST NW

WASHINGTON, DC 20036

Employer/Occupation: AFSCME/secretary-treasurer

Contact: (202) 429-1000



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Arizona. Done at the Capitol in Phoenix, on this day, July 05, 2017.

Michele Reagan

Michele Reagan Secretary of State

Date/Time of Certificate: 7/5/2017 1:10:54PM

Verification URL: www.azsos.gov